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INFORMATION FOR CONTRIBUTORS / AVERTISSEMENT AUX AUTEURS

The **Bibliotheca Medica Canadiana** is a vehicle providing for increased communication among all health libraries and health sciences librarians in Canada. We have a special commitment to reach and assist the worker in the smaller, isolated health library. Contributors should consult recent issues for examples of the type of material and general style sought by the editors. Queries to the editors are welcome. Submissions in English or French are welcome.

La **Bibliotheca Medica Canadiana** a pour objet de permettre une meilleure communication entre toutes les bibliothèques médicales et entre tous les bibliothécaires qui travaillent dans le secteur des sciences de la santé. Nous nous engageons tout particulièrement à atteindre et à aider ceux et celles qui travaillant dans les bibliothèques de petite taille et les bibliothèques relativement isolées. Si vous désirez nous soumettre un manuscrit, vous êtes prié de consulter quelques livraisons récentes de la revue pour vous familiariser avec le contenu et le style général recherchés par la rédaction. La rédaction recevra avec plaisir vos questions et observations. Les articles en anglais ou en français sont bienvenus.

Indexed In/Indexé par: **Library and Information Science Abstracts (LISA); Cumulative Index to Nursing and Allied Health Literature (CINAHL).**

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volume 9(4)	11 March 1988	volume 9(4)	11 mars 1988
volume 10(1)	10 June 1988	volume 10(1)	10 juin 1988

INFORMATION FOR CONTRIBUTORS

MANUSCRIPTS

The editors of **Bibliotheca Medica Canadiana** welcome any manuscripts or other information pertaining to the broad area of health sciences librarianship, particularly as it relates to Canada.

Contributions should be submitted **in duplicate** and the author should retain one copy. Contributions should be **typed double-spaced** and **should not exceed six pages or 2100 words**. Pages should be numbered consecutively in arabic numerals in the top right-hand corner. Articles may be submitted in French or in English but will not be translated by the editors or their associates. Style of writing should conform to acceptable English usage and syntax; slang, jargon, obscure acronyms and/or abbreviations should be avoided. Spelling shall conform to that of the **Oxford English Dictionary**; exceptions shall be at the discretion of the editors. Contributors who wish to submit their work in machine-readable format should contact the editors in advance to ensure that compatible equipment is available in the editorial offices.

All contributions should be accompanied by a covering letter which should include the author's (typed) name, title and affiliations, as well as any other background information that the contributor feels might be useful to the editorial process.

REFERENCES

All references should be given in the Vancouver style; see **Canadian Medical Association Journal** 1985;132:401-5. Contributors are responsible for the accuracy of their references. Personal communications are not acceptable as references. References to unpublished works shall be given only if obtainable from an address submitted by the contributor.

ILLUSTRATIONS

Any illustrations or tables submitted should be black and white copy camera-ready for print. Illustrations and tables should be clearly identified in arabic numerals and should be well-referenced in the text. Illustrations and tables should include appropriate titles.

AVERTISSEMENT AUX AUTEURS

MANUSCRITS

Les rédacteurs de la **Bibliotheca Medica Canadiana** sont à la recherche de manuscrits ou d'autres renseignements portant sur le vaste domaine de la bibliothéconomie dans le contexte des sciences de la santé. Nous recherchons tout particulièrement des articles relatifs à la situation au Canada et à des thèmes d'actualité.

Les articles devraient être remis **en deux exemplaires** et l'auteur devrait en garder une copie. Les articles devraient être **dactylographiés à double interligne** et **ne devraient pas dépasser six pages ou 2100 mots**. Prière de numéroter les pages consécutivement en chiffres arabes en haut de la page à droite. Les articles peuvent être remis en français ou en anglais, mais ils ne seront pas traduits par la rédaction ni par les associés de la rédaction. Le style d'expression écrite se conformera à l'usage et à la syntaxe acceptables du français; il est préférable d'éviter l'argot, les sigles et autres abréviations obscures. L'orthographe se conformera à celle du **Robert**; les exceptions à cette règle seront à la discrétion de la rédaction. Les auteurs qui désirent remettre leurs manuscrits sous forme électronique devraient communiquer à l'avance avec la rédaction afin de s'assurer que l'équipement compatible est disponible aux bureaux de la rédaction.

Tout article devrait s'accompagner d'une lettre explicative fournissant les informations suivantes: nom de l'auteur (dactylographié), son titre et lieu de travail, ainsi que tout autre détail que l'auteur jugerait utile à la rédaction.

REFERENCES

Toute référence devrait être citée selon le style dit de Vancouver; voir le **Journal de l'Association médicale canadienne** 1985; 132: 401-5. Les auteurs sont responsables de l'exactitude de leurs références. Les communications de nature personnelle ne sont pas acceptables comme références. Il ne faut citer une référence à un ouvrage inédit que si ce dernier est disponible à une adresse indiquée par l'auteur.

ILLUSTRATIONS

Les illustrations et les tableaux doivent être en noir et blanc, et prêts à l'impression. Les illustrations et les tableaux doivent être clairement identifiés en chiffres arabes et avoir des renvois clairs dans le corps du texte. Les illustrations et tableaux doivent comporter des titres pertinents.

BIBLIOTHECA MEDICA CANADIANA NEWS AND NOTES

The editors welcome news items from members of the Canadian Health Libraries Association, or any news that may be of interest to members. Please feel free to copy this form in any way for submission, and to attach separate sheets for lengthy items.

APPOINTMENTS ? Who _____
HONOURS ? What _____
AWARDS ? When _____
Where _____

PROMOTIONS ? Who _____
MOVES ? From _____
RESIGNATIONS ? To _____
When _____

SEMINARS ? What _____
WORKSHOPS ? When _____
Where _____

PUBLICATIONS ? What _____
BOOK REVIEWS ? Where _____
Citation _____

ACQUISITIONS ? What _____
GIFTS ? Why _____
GRANTS ? Amount _____
Donor _____

TRIPS ? Who _____
LECTURES ? Where _____
VISITORS ? When _____
Why _____

From:

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To:
Lynn Dunikowski, Editor
Bibliotheca Medica Canadiana
Canadian Library of Family Medicine
Natural Sciences Centre
University of Western Ontario
London, Ontario N6A 5B7

BIBLIOTHECA MEDICA CANADIANA

volume 9, number 4 1988

i Information for Contributors
iv Newsgathering Form
179 From the Editors
180 Letter to the Editors - Jensen
181 A Word from the President - Greenwood
182 Quelques Mots de la Présidente - Greenwood
184 Report: Task Force on Hospital Library Standards - Greenwood
185 Libraries Without Walls - CHLA/ABSC Response
189 Auditor's Report - Kimmerly
193 CHLA/ABSC From Sea to Sea Programme
196 Continuing Education: Telemedicine

ORIGINAL PAPERS

198 Scientists and Information: How They Get It - Lloyd
203 Cataloguers and Dinosaurs - Kennedy
210 Grateful Med - Dilks & McKibbon
214 A Health Library in Northern Alberta - Bruce

... continued

The Bibliotheca Medica Canadiana is published 4 times per year by the Canadian Health Libraries Association. Opinions expressed herein are those of contributors and the editor and not the CHLA.

Bibliotheca Medica Canadiana est publié 4 fois par année par l'Association des Bibliothèques de la Santé du Canada. Les articles paraissant dans BMC expriment l'opinion de leurs auteurs ou de la rédaction et non pas celle de l'Association.

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NEWS AND NOTES

217 Groen New MLA President-Elect
217 Canadian Association of the History of Nursing in Canada
217 CHLA Anniversary Award
218 People on the Move
219 In Memoriam - Laurent-G. Denis
220 From the HSRC - Wong
221 Du CBSS - Wong
223 Meetings / Workshops
229 New Publications
232 Positions Available
236 CHLA Board / BMC Staff

FROM THE EDITORS

The Olympics have come and gone, but we'll remember them. Some of the most interesting media interviews were with the runners who carried the Olympic torch -- so many of them explained how carrying the torch made them feel part of Canada and made them proud to be Canadian. It's something you don't hear often.

We in the health libraries community have something new to give us pride in our Canadian identity: the election of Frances Groen, Life Sciences Area Librarian at McGill University, to the position of President-Elect of the Medical Library Association (MLA). Brief consideration of the numbers of our Association, about 400, versus the numbers of the MLA, about 5,000, will emphasize the statistical unlikelihood of such an event. Looking at the statistics should not overshadow the record of Mrs. Groen's contributions to the MLA, which have resulted in her election to that Association's highest office. We offer our congratulations, and look forward to a Presidential year with Canadian impact.

Since we'll be watching MLA activities with more than usual interest, we might want to emulate some of them -- for example, their willingness to be aware of and be involved in the political process. Have you noticed the column **Capital News** in the **MLA Newsletter**? Recent columns have included a list of "Contacts That Everyone Should Know", a summary of a major report on technology and U.S. government information policies, and a survey of readers' political involvement. Would it be useful to have a similar column in **BMC**? With the developments in Canadian copyright legislation, now might be a good time to start.

Mostly, we tend to define Canadian as not American; some of us define a Canadian as someone who isn't interested in defining Canadian. But there are outbursts of questing for a national identity--we may be in one now; **Maclean's** recently devoted an entire issue to the topic. What does being Canadian mean to you as a health librarian? Often, it seems to mean frustration. It means finding only American material when you're researching a topic: American statistics, American articles, American standards. Our Association is working to help change this situation. CHLA has already produced **Canhealth**, a valuable compendium of Canadian information resources. Two of our members, Tom Flemming and Diana Kent, are in the process of developing a much-needed course on Canadian health statistics. The Task Force on Hospital Library Standards is working diligently to develop standards appropriate to Canadian institutions. You too can participate in producing and improving access to Canadian information -- there's lots left to do!

For those who want to feel Canadian and can't, may we suggest visiting another country? Even (or especially) the United States would do. The Medical Library Association Annual Meeting is in New Orleans this year, a city of great

jazz and nightlife, and wonderful food. The Special Library Association Annual Meeting is in Denver Colorado, a fabulously scenic state with its own special atmosphere of the wild west and gold-mining and the joys of living outdoors. When you start complaining about how most U.S. city centres shut down at five o'clock, and wondering how Americans can possibly get along without knowing how to make tea properly, you're starting to feel Canadian. (New Orleans is the exception here, it doesn't ever close down. They probably know how to make tea too, although it will likely be accompanied by some exotic liqueur.)

Last but not least in the recipe for bolstering Canadian identity is to visit other parts of your own country -- Halifax for our Association's 12th Annual Meeting, for instance. Halifax and Nova Scotia are wonderful to explore -- the ocean and beautiful beaches and coves, the Cabot Trail, the Annapolis Valley. (This account is not at all biased by the fact that one of your editors was born on Cape Breton Island.) The meeting promises to be most interesting; we present the program on pages 193-5 of this issue, and there are further details on pages 223-5. Why not get out your travel brochures and plan a holiday?

Lynn Dunikowski
Editor

Claire Callaghan
Assistant Editor

LETTER TO THE EDITORS

Editor's note: The following letter responds to Ms. Greenwood's letter expressing CHLA's concern with the practice of publishing varying editions of a journal (BMC 1988;9(3):130).

Dear Ms. Greenwood:

In response to concerns voiced by you and by some Canadian libraries, I've decided to resume serving all Canadian subscribers the same edition of **Nursing88**. This policy will begin with the May issue.

I trust this will clear up any confusion that has existed since 1986 when the practice of serving demographic editions to various nursing specialties, as we do in the United States, was extended to Canada.

Thank you for your interest in **Nursing88**.

Sincerely,

Marlene F. Jensen, Vice President, Magazines
Springhouse Corporation

A WORD FROM THE PRESIDENT

Jan Greenwood

Manager of Library Services
Ontario Medical Association
Toronto, Ontario

It is perhaps irreverent to report that following a week in California I have some difficulty recalling the details of the Board meeting which took place at the O.M.A. on March 4-5!

Much of my time was spent on the UCLA campus where I visited the History of Medicine and Medical libraries and even attended lectures on medical ethics and health economics. There was something decidedly disconcerting about meeting with aggressively tanned and healthy looking Californian colleagues who were bundled up in winter clothes to ward off the rigours of 21 degree temperatures while I paraded my pallid bod in an odd assortment of beach clothes.

The agenda for the Board meeting was foolishly ambitious - my fault entirely - but your elected representatives were stalwart to the end. As usual the full minutes will be circulated to all chapter presidents, but a few highlights deserve mention here.

ASSOCIATION BUSINESS

The meeting gave the members of the Board and opportunity to meet our new auditor Mr. Ken Kimmerly, whose financial statement appears elsewhere in this issue of **BMC**. I am pleased to report to the members that it is to the credit of our current and past treasurers that Mr. Kimmerly expressed immense satisfaction at the way in which the Association's affairs have been and are being conducted.

NEW CHAPTER

It is always a pleasure to mark the occasion of the formation of a new chapter since these are obviously the life-blood of the Association. At the Board meeting approval was given to our thirteenth chapter: the Northwestern Ontario Health Libraries Association. NOHLA is centered in Thunder Bay and draws for its membership largely upon health libraries which are participants in the Northwestern Medical Programme administered by McMaster University. Carol Schmaltz is its first co-ordinator; Barbara Murray its secretary.

FLOWER REPORT

Thanks to the feedback from CHLA chapters the Board was able to formulate a preliminary response to the FLOWER REPORT which will be taken to the HSRC Advisory Committee meeting on April 8 and is reproduced herein (p. 185-8). Concrete reaction to the REPORT will necessarily take time to evolve and the Board continues to encourage your comments, both on the REPORT itself and on CHLA's initial response.

MEMBERSHIP SERVICES

The Board continued to examine ways in which it can consolidate support for the chapters and this topic will be pursued further at the meeting scheduled for June 11.

A decision was made to develop a series of CHLA FACT SHEETS, the focus of each to provide basic information about a specific topic for library personnel or, in some cases health library users. Suggested topics include CD-ROM, copyright, electronic mail and interlibrary loans. The board invites CHLA members to send in their suggestions and to volunteer their expertise.

ANNUAL CONFERENCE

Ann Barrett gave a tantalizing presentation on the '88 Conference which promises to be excellent, both in terms of the plenary and continuing education programs, as well as the social functions. The Conference will address a variety of issues pertinent to health libraries in Canada today and I hope that many CHLA members will avail themselves of this opportunity to get involved in Halifax.

QUELQUES MOTS DE LA PRESIDENTE

Jan Greenwood

Responsable des services de bibliothèque
Association médicale de l'Ontario
Toronto, Ontario

Il est peut-être impertinent de l'avouer mais après une semaine en Californie j'ai de la peine à me rappeler les propos de la réunion du Comité (O.M.A./A.M.O., Toronto; 4-5 mars).

Je me suis surtout retrouvée sur le campus de UCLA dans la Bibliothèque médicale et dans celle de l'Histoire de la médecine. J'ai même assisté à des conférences sur le code déontologique et sur les aspects économiques de la santé. C'est un peu plus que déconcertant cette rencontre avec mes collègues de la Californie compte tenu de leur belle couleur bronzée et de leur santé éclatante. Alors que j'étale ma pâleur dans un assortiment bigarré d'affaires de plage mes Californiens doivent s'emmitouffler pour se protéger contre un frig-horrifique 21° C.

Malgré un ordre du jour beaucoup trop ambitieux - mea maxima culpa - vos représentants ont bien su tenir

le coup. Comme d'habitude, le compte rendu sera remis aux présidents de chapitres mais il importe d'en souligner quelques faits saillants.

L'ORDRE DU JOUR

La réunion a permis aux membres de faire la connaissance de M. Ken Kimmerly, le nouveau comptable, dont la déclaration budgétaire se trouve ailleurs dans ce numéro. Tout à notre honneur, M. Kimmerly annonce que la gestion budgétaire de l'Association a été et continue toujours d'être en très bonnes mains grâce surtout à nos trésoriers d'hier et d'aujourd'hui.

NOUVEAU CHAPITRE

Nous accueillons toujours les nouveaux chapitres avec le plus grand plaisir car ils représentent, bien sûr, la force vitale de notre Association. Le Comité a donc reconnu notre treizième chapitre: l'Association des Bibliothèques de la santé du nord-ouest de l'Ontario (NOHLA). Ce nouveau chapitre siège à Thunder Bay et ses abonnés proviennent essentiellement des bibliothèques de la santé qui participent au Northwestern Medical Programme (Programme médical du Nord-Ouest) géré par l'Université McMaster. Carol Schmaltz en est la coordonnatrice avec Barbara Murray au secrétariat.

LE RAPPORT FLOWER

Grace au feed-back des chapitres du CHLA/ABSC, le Comité a pu formuler une réponse préliminaire au RAPPORT FLOWER. Incluse dans ce numéro, cette réponse sera déposée le vendredi 8 avril au moment de la réunion du Conseil Consultatif du HSRC/CBSS. Une réponse définitive requiert un certain temps et le Comité encourage vos commentaires tant sur le RAPPORT même que sur la réponse préliminaire faite par le CHLA/ABSC.

SERVICES AUX ABONNES

Le Comité s'interroge toujours sur la meilleure façon d'appuyer les chapitres ce qui fera aussi l'objet de la réunion du 11 juin.

Une décision a été prise sur le développement d'une série de BILANS CHLA/ABSC. Chacun des BILANS chercherait à faire parvenir des renseignements précis sur un sujet particulier d'intéret au personnel des bibliothèques ou même, parfois, à la clientèle des bibliothèques de la santé. Parmis les thèmes proposés se trouvent les CD-ROM (lecteur de disque), les droits d'auteurs, le courrier électronique et les emprunts entre bibliothèques. Les membres sont priés de faire parvenir leurs suggestions et de partager leurs compétences.

CONFERENCE ANNUELLE

La communication d'Ann Barrett démontre clairement que la conférence 88 s'annonce prometteuse d'abord sur le plan des programmes pléniers et d'education permanente non moins qu'au niveau des activités sociales. La conférence abordera un grand nombre de questions pressantes relatives aux bibliothèques de la santé canadiennes. Impliquons-nous à Halifax!

REPORT OF THE CHLA/ABSC TASK FORCE ON HOSPITAL LIBRARY STANDARDS

Jan Greenwood, Chair

Manager of Library Services
Ontario Medical Association
Toronto, Ontario

At its meeting of February 26-27 the Task Force completed revisions of STANDARDS I-VIII in preparation for DRAFT I which will be circulated to all CHLA/ABSC members during May. Substantial changes were made to STANDARD III: DIRECTION AND STAFFING, and the new STANDARD VI: INFORMATION RESOURCES AND SERVICES PROGRAM was expanded to do justice to the professional responsibilities of hospital library staff, particularly with respect to collection development and information technology.

DRAFT I will comprise the CCHA standards as they currently exist, the proposed revisions and at least one background document per standard. A classification "TABLE FOR DETERMINATION OF HOSPITAL CATEGORY" has been approved and owes much to the ALBANY MANUAL. Definitions for library personnel have also been approved, as have the recommended contents for library policies and procedures manuals. At the time of writing a glossary and a background document for STANDARD IV: FACILITIES, EQUIPMENT AND SUPPLIES are being developed, and Task Force members are selecting sample quality assurance audits for inclusion.

I would like to urge CHLA/ABSC members who are planning to attend the Annual Conference in Halifax to digest the above document in preparation for the planned open forum. Since the Task Force itself will also meet in Halifax on June 16, other members should forward their suggestions for improvement to me no later than June 6; please include, if you can, suggestions for recommended core lists, sample QA audits and any references that might be usefully included in the planned selective bibliographies.

I hope to see as many hospital librarians as possible at the Panel on Hospital Library Standards in Halifax where, incidentally, Ursula Poland will be on hand to offer her invaluable comments and advice. See you there!

Libraries Without Walls: Blueprint for the Future

Report of a Survey of Health Science Library Collections and Services in Canada

CHLA/ABSC Response

INTRODUCTION

Libraries Without Walls: Blueprint for the Future is the "report of a survey of health science library collections and services in Canada." It is a work worthy of thoughtful consideration and debate among all those concerned with the many problems that impede access to the information needed to provide quality health care in an efficient and effective manner.

Since the report was published, CHLA/ABSC has taken every available opportunity to draw it to the attention of the health library community. The author of the report, Mrs. Flower, was invited to speak at the 1987 CHLA/ABSC Annual Conference in Vancouver about her findings and this presentation was subsequently published in **Bibliotheca Medica Canadiana** (9(2): 98-103). More than 200 copies of the report have been distributed to medical school, library school and teaching hospital libraries throughout Canada. A copy has also been deposited with each of the twelve association chapter executives who have been encouraged to discuss the issues raised by the report at local meetings. The report has just been translated into French and soon will be available for similar distribution in the francophone health library community.

In spite of the fact that CHLA/ABSC members will not have an opportunity to discuss the Flower Report in an open forum until the June 1988 CHLA/ABSC Annual Conference, the Board, with input from Chapters of the Association received before March 1, 1988, would like to make the following preliminary response to the report's recommendations in preparation for the HSRC Advisory Committee meeting scheduled for April 8.

We sincerely hope that for our Association, HSRC and SRCMSL, these remarks, along with those already submitted by some of the parties to this study, will only serve as an introduction to a continuing dialogue aimed at maintaining and improving the delivery of quality health care information in Canada.

Response to the Recommendations

Recommendation:

As a matter of urgency, a task force on harnessing technology for health sciences information should be established.

Response:

The CHLA/ABSC Board shares the opinion of CISTI that the establishment of a task force on harnessing technology would not be a practical solution for dealing with the enormous issue of technology and its impact on information. Acknowledging that the recommendation touches upon a critical issue we must nevertheless recognize that the majority of health science centres and hospital libraries have little choice but to adopt the technologies offered by their parent organizations.

With this constraint, the CHLA/ABSC Board believes that what is really required is the education of health sciences and hospital library personnel, including administrators, so that they may be aware of the technology already available and how it can best be used to manage and improve the dissemination of health information. We would, for example, like to explore the ways whereby teaching and non-teaching hospital administrators could be convinced to purchase basic, inexpensive, stand-alone computer equipment to allow health information providers to access online medical databases or electronic mail services and to build efficient in-house databases to make their collections more accessible.

As part of this education process the CHLA/ABSC Board intends to prepare a series of fact sheets on information technology (among other subjects) for distribution to CHLA/ABSC members. We welcome the participation of CISTI, and anyone else so inclined, in any co-operative project which will help health information providers keep abreast of technological developments and become champions in their implementation, wherever it is deemed to be of use in bridging the information gap. In this respect we are already grateful to CISTI for offering to assume responsibility as a depository for information reports on turnkey and other systems, for agreeing to establish an Automation Referral Registry, and to keep health sciences libraries informed on the latest technical innovations through various publications.

Recommendation:

In each health sciences centre an Information Management Council should be established.

Response:

Although we are in basic agreement with this recommendation, the CHLA/ABSC Board believes that the establishment of such councils is normally part of broader university policies and existing university administrative structures and as such is outside our purview. The wisdom of creating such councils and their possible impact on information management policy within a given institution is something that must be considered at the local level and within existing local frameworks.

Recommendation:

A Joint SRCMLS/CHLA Committee should be established to study interlibrary loans in the health sciences sector, and to make recommendations on a) ways to manage the volume; b) ways to rationalize costs; and c) ways to improve delivery time.

Response:

While the CHLA/ABSC Board approves the recommendation that a joint committee be established to study interlibrary loans in the health sciences sector, it would like to see that, in addition to representation from SRCMSL and CHLA, there be a representative of HSRC, the largest supplier of interlibrary loans to the health sciences community. The Board also specifically recommends the appointment of Donna Dryden to this proposed committee, since she will be President-Elect of CHLA/ABSC in 1988-89 and is a member of the HSRC Advisory Committee.

If a Committee is established it should seek the strong co-operation of other organizations such as CLA and CISTI, which are working on an even broader scale to solve the current interlibrary loan problems exacerbated by increasing costs and diminishing collections. Seeking further co-operation is also important when we consider that the interlibrary loan policies of most health science centres are determined by the universities of which they are a part and not by the centres themselves.

Although not within the scope of the report, CHLA/ABSC believes that any task force considering the interlibrary loan question must also consider ways in which smaller centres can be helped to utilize their local resources to the fullest extent. These centres must be educated about the resources available to them through CISTI, their local health science centres, networks, and commercial vendors in order that they all may have equal opportunity of access to information. They must also be encouraged to join in the computer and telecommunications revolution which could greatly assist them in access to and the sharing of information. Some of this work has already been done at the Chapter level where several libraries have co-operated to produce local union lists. More can and needs to be done.

Recommendation:

It is recommended that a working party be struck to review and explore present and potential sources of financing for health sciences libraries in Canada.

Response:

Since health care funding is largely a provincial, and to a lesser extent, federal matter, the CHLA/ABSC Board believes that this recommendation is outside its jurisdiction. We of course encourage the health science centres to use whatever means are at their disposal to make their respective provincial governments, as well as the federal government, aware of the need for more funding. We also encourage them to take a more active role in marketing their expertise and resources in order to encourage greater financial participation by the public at large through the establishment of endowments and the like.

We all share in the obligation to give health information the high profile it deserves and to prove it worthy of public support.

Recommendation:

It is recommended that the Health Sciences Centre at CISTI be maintained and strengthened.

Response:

The CHLA/ABSC Board would like to see HSRC maintained and strengthened by:

1) Re-allocating its resources in ways that will exploit the expertise of the health sciences library community throughout Canada and

2) Focussing its efforts upon education, especially with respect to information technology.

The CHLA/ABSC Board will continue to seek input from its members and to consider the many implications of the report. More important, it will continue to strive to keep its members informed and to help them in their goal of providing their clients with the most efficient and effective access to information. We hope that all who are involved in or affected by this study share this same goal.

KENNETH D. KIMMERLY

CHARTERED ACCOUNTANT

10 RUSSELL ROAD

ETOBICOKE, ONTARIO M9P 3G5

AUDITOR'S REPORT

To the Directors

Canadian Health Libraries Association

I have examined the Statement of Financial Position of the Canadian Health Libraries Association as at May 31, 1987 and the statements of Capital, and Income and Expenses for the year then ended. My examination included a general review of the accounting records and other supporting evidence as considered necessary in the circumstances.

My examination of income which, because of its nature cannot be verified completely, was limited principally to tests of the deposits of recorded receipts in authorized depositories.

In my opinion, subject to the preceding paragraph, these financial statements present fairly the financial position of the Association as at May 31, 1987 and the results of its operations for the year then ended, in accordance with generally accepted accounting principles applied on a basis consistent with that of the preceding year.

K.D. Kimmerly
Chartered Accountant

Etobicoke, Ontario
March 4, 1988

CANADIAN HEALTH LIBRARIES ASSOCIATION STATEMENT I

STATEMENT OF FINANCIAL POSITION

AT MAY 31, 1987

	1987 $	1986 $	1985 $
Assets			
Cash in Banks	44,819.24	21,144.76	5,838.55
Term Deposit	-	-	16,400.00
Advance - Conferences	3,000.00	3,500.00	-
	47,819.24	24,644.76	22,238.58
Microcomputer	5,056.53		
Exhibition Screen	812.00		
	5,868.53		
Less Depreciation	1,173.70		
	4,694.83		
Total Assets	52,514.07	24,644.76	22,238.58
Liabilities			
Dues collected in Advance	2,509.87	-	3,758.26
Accounts Payable	500.00	300.00	150.00
	3,009.87	300.00	3,908.26
Capital			
Per Statement II	49,504.20	24,344.76	18,330.32
Total Liabilities and Capital	52,514.07	24,644.76	22,238.58

CANADIAN HEALTH LIBRARIES ASSOCIATION STATEMENT II

STATEMENT OF FINANCIAL POSITION

AT MAY 31, 1987

	1987 $	1986 $	1985 $
Balance - Start of Year	24,344.76	18,330.32	8,919.70
Adjustment	-	2,000.00	-
	24.344.76	20,330.32	8,919.70
Excess of Income over Expenses During Year Statement III	25,159.44	4,014.44	9,410.62
Balance - End of Year	49,504.20	24,344.76	18,330.32

CANADIAN HEALTH LIBRARIES ASSOCIATION STATEMENT III

STATEMENT OF FINANCIAL POSITION

AT MAY 31, 1987

	1987 $	1986 $	1985 $
Income			
Membership Dues	16,050.32	9,973.26	9,911.05
Conference Income	13,998.71	3,571.88	11,073.11
Computer Rentals	6,000.00	-	-
Membership Lists	748.63	-	-
Royalties - Canhealth	702.70	-	-
Sundry	-	445.11	254.83
Interest Earned	1,249.80	1,887.29	2,528.92
CIDA Grant	-	1,000.00	-
Total Income	38,750.16	16,877.54	23,767.91
Expenses			
Convention Expense	-	-	2,300.00
Printing and Postage	4,230.32	5,366.29	7,331.86
Translation	425.64	525.60	766.35
Travel and Meetings	5,005.49	5,534.86	3,686.43
Audit Fees	500.00	300.00	150.00
Research Grants	675.00	500.00	-
Anniversary Award	500.00	-	-
Depreciation	1,173.70	-	-
Sundry	1,080.57	636.35	122.65
Total Expenses	13,590.72	12,863.10	14,357.29
Excess of Income Over Expenses	25,159.44	4,014.44	9,410.62

C H L A / A B S C '88 F R O M S E A T O S E A

CITADEL HALIFAX

JUNE 11 - 15, 1988

PROGRAMME

SATURDAY, JUNE 11

9:00 - 17:00	Board Meeting	Suite 250

SUNDAY, JUNE 12

8:00 - 18:00	Staffed Registration Desk	Upper Lobby
9:00 - 17:00	CE 17 "**Developing In-House Data Bases**" - Jane Beaumount	Salon V
9:00 - 17:00	CE 18 "**Put It in Writing**" - Eileen Pease	Salon VI
18:30 - 20:30	Harbour Cruise, sponsored by McAinsh	Harbour Queen

MONDAY, JUNE 13

8:00 - 17:00	Staffed Registration Desk	Upper Lobby or Pool Patio
9:00 - 9:15	Welcomes and Announcements Penny Logan, President, MHLA Jan Greenwood, President, CHLA	Cavalier Room
9:15 - 10:00	Keynote Speaker, Dr. David Horrobin, Efamol. Introduced by Chris Toplack. "**Scientific Medicine - Success or Failure?**"	Cavalier Room

10:00 - 11:00	Nutrition Break Exhibits Opening - Bill Owen	Pool Patio Terrace Room
11:00 - 12:00	**Integrated Academic Information Management Systems - IAIMS** Naomi Broering, Medical Library, Georgetown University. Introduced by Ann Manning.	Cavalier Room
12:00 - 13:30	Lunch. Speakers' and/or Interest Groups	To be decided
	Lunch. General Delegates	Individual Choice
13:30 - 14:30	**Workload Measurement Systems.** Florence Hersey. Introduced by Joyce Kublin.	Cavalier Room
14:30 - 15:15	Break/Exhibits	Pool Patio & Terrace Room
15:15 - 17:00	**Panel on Hospital Library Standards** moderated by Anitra Laycock	Cavalier Room
18:30 -	Banquet (Bus to Shore Club for Lobster Dinner)	Shore Club, Hubbards

TUESDAY, JUNE 14

8:30 - 12:30	Staffed Registration Desk	Upper Lobby or Pool Patio
9:00 - 10:00	**Panel on Response from Academics, Hospitals, CISTI to "Libraries Without Walls"** (the Flower Report) Moderated by Ann Manning	Cavalier Room
10:00 - 10:45	Break/Exhibits	Pool Patio & Terrace Room

10:45 - 12:00	**Technology Update**. Coordinated by Bill Maes. Technology examined will include: Hypercard, Desktop Publishing, Sydney, LANs (Local Area Networks) and CAI.	Cavalier Room
12:00 - 13:30	Lunch. Speakers and/or Committees	To be decided
	Lunch. General Delegates	Individual Choice
13:30 - 15:30	**Annual General Meeting**	Cavalier Room
15:30 - 16:00	Break/Exhibits	Pool Patio and Terrace Room
16:00 - 17:00	**CISTI Update**, Maureen Wong, HSRC	Cavalier Room
17:00 -	Post-Conference Board Meeting	Conference Suite

WEDNESDAY, JUNE 15

9:00 - 17:00	CE 459, MLA "**Online Biochemical Searching in the Health Sciences**" Bonnie Snow	Salon V
9:00 - 12:00	CE 19 "**Training Your Staff**" Penny Kenmay	Salon VI

CONTINUING EDUCATION THROUGH TELEMEDICINE

Teleconferencing can be defined as two-way communication among groups or individuals remote from each other, using a telecommunications medium. There are three general types of teleconferencing: audio only, audiographic (which involves the use of devices such as freeze frame television), or video. The use of these technologies in the health care system is called telemedicine or telehealth. Given Canada's geographic enormity, it is a natural territory for telemedicine. The country is vast, but sparsely populated, and this situation creates a need to link people to ensure the transfer of knowledge and the exchange of information.

The delivery of continuing education is one of the primary applications of teleconferencing in the health care system. It has always been expensive for isolated health professionals to attend educational meetings and workshops in major city centres, and the costs of maintaining professional competence are continuing to rise. Audio teleconferencing in particular, because of its cost-effectiveness, has been a popular medium in Canada for the delivery of continuing education programs.

Established in mid-1982 as a joint venture between the Royal College of Physicians and Surgeons of Canada and Toronto General Hospital, Telemedicine Canada was then called The Joint Royal College /Toronto General Hospital Teleconference Project. It was designed as a two year pilot project, the primary aim of which was to establish an audio teleconferencing system that the College could use for administrative and continuing medical education purposes. The project was deemed successful and the Ontario Ministry of Health in 1984 supplied a large grant that was to be applied over three years, and was to involve all five Ontario medical schools in the further growth and development of Telemedicine Canada.

That three-year period, and Ministry involvement, ended in March 1987 and since then Telemedicine Canada has been owned and operated jointly by Toronto General Hospital, the University of Toronto and McMaster University. Telemedicine Canada now boasts more than 360 participating facilities nationwide, producing 35 different series in three categories: physician, nursing, and allied health.

Telemedicine Canada has recently launched a series of continuing education programs designed specifically for hospital library personnel. Management Skills for Hospital Librarians, planned in consultation with the Ontario Hospital Libraries Association, features audio teleconferences on a variety of topics: the subject of "Collection Development" was recently presented by Margaret

Taylor of the Children's Hospital of Eastern Ontario. Claire Callaghan of the University of Western Ontario will talk about "Serials Management" on May 18. Hosted by Jennifer Bayne, Chief Librarian at Toronto General Hospital's Fudger Medical Library, this series offers library personnel the chance to expand their knowledge, upgrade their job skills, and share ideas with other professionals across the country.

The vehicle is the telephone. Equipment consists of a speaker box and microphone(s) that hook up simply to your telephone line. Registered participants simply dial a phone number that automatically links them up to a live teleconference. All programs are interactive -- audiences not only listen to a presentation, but also have the opportunity to ask questions or make comments.

The cost is $55 per program per location. This flat fee includes any slides or handouts that may accompany a program, as well as mailing costs. The cost remains the same regardless of the number of participants at each health care facility. The hospital library series is offered on Wednesdays from 2:30 - 3:20 p.m. (Eastern time). All programs follow a "within the hour" lecture format to minimize loss of staff time. Participants must register by telephone a minimum of three weeks in advance. For more information, contact Andrea Steiner at 1-416-595-4472.

FOR FURTHER READING

Chouinard J. Satellite contributions to telemedicine: Canadian CME experiences. **Can Med Assoc J** 1983;128:850-5.

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SCIENTISTS AND INFORMATION: HOW THEY GET IT

D.A. Lloyd, M.B., F.R.C.P.C.

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Science is an activity which requires the scientist to build upon the body of past and present knowledge and is consequently dependent on an unimpeded flow of information among its participants.[1] Communication among scientists takes place in a variety of forms, mainly in learned journals. The growth in scientific literature and thus the number of journals is prolific.

GROWTH OF SCIENTIFIC LITERATURE

For the scientist, this growth in knowledge does not simply necessitate coping with additional new information, but also with knowledge that has become outdated or obsolete. Not surprisingly many scientists are frightened and overwhelmed; they either do not read or try to keep current, or limit themselves to subjects of special interest.

The first volume of **Index Medicus** contained approximately 17,000 citations from 700 journals. Today a single month's volume contains an average of 21,000 citations from over 3,000 journals.[2] Any attempt to keep abreast of new information represents a major problem. In 1986, Haynes et al in the first of an excellent series of six articles, discussed the problems faced by health professionals in attempting to keep up with the literature.[3] To keep up with 10 leading journals in internal medicine a reader must digest 200 articles and 70 editorials each month.[4] It has been estimated that the biomedical literature is expanding at the rate of 6% to 7% per annum so that the information available to read will double in 10 to 12 years.[5]

The reasons cited for reading are obvious and include:

a. to keep knowledge current

b. to solve a specific problem

c. to prepare for a research project

d. to keep abreast of professional news

While the reasons provided are admirable, the strategies that readers use are not always so admirable. Thus non peer-reviewed journals are read, scanning or browsing is a regularly used strategy, and library indexing systems are used infrequently. In a survey of the time spent reading Canadian physicians claimed to read 3 hours per week.[6] To provide them with skills to utilize that time more efficiently, they need to be educated on how to read critically

and where to find the information in the most efficient and cost effective manner.

Currently, methods employed to search for information include:

a. asking a colleague

b. searching a personal library

c. leafing through **Index Medicus**

d. engaging a specially trained librarian

e. end-user searching

SURVEY OF MEDICAL FACULTY

To assess computer use and needs a survey of a random sample of faculty members in the faculty of medicine at the University of Western Ontario was conducted by me in the spring of 1987. 377 survey forms were sent out and 270 replies received (72% response rate). Of the respondents, only 14% had no access to a computer, while most had more than one computer, usually one at work and one at home. The level of computer literacy was found to be low with only 28% of respondents having taken a computer course; of those only half had registered for a university course.

In this survey we were interested in the methods by which faculty members research the biomedical literature. The profile of 287 searchers is shown in Table 1. 18 (6.3%) described themselves as end-users while some at the same time continued to use the librarian

Table 1

UNIVERSITY OF WESTERN ONTARIO MEDICAL FACULTY

PROFILE OF 287 SEARCHERS

Search frequency	End-User		Intermediary Search		Total (%)
	n (%)	group%	n (%)	group%	
	18 (6.3)		269 (93.7)		287 (100)
Never	0		17 (5.9)	11.1	
< Once a month	6 (2)	40	114 (39.7)	74.5	
Once a month	7 (2.4)	46.7	21 (7.3)	13.7	
Once a week	2 (0.7)	13.3	1 (0.3)	0.7	
Once a day	0		0		
Total	15	100 %	153	100 %	

as an intermediary searcher. The majority, 269 (93.7%), used an intermediary to do their searches. A surprising finding was how infrequently respondents needed to conduct a literature search. At least 48% of the total group conducted a search less than once a month.

The reason for becoming an end-user and continuing to do so was usually because of the time delay in obtaining the information from other sources, and the convenience of having the search process take place within the office. Most end-users described themselves as being self taught with the search software vendor's manual as the source of information.

Information sought was for research purposes, solution of clinical problems and keeping up to date. 50% of end-users would advise colleagues to start searching themselves, whereas 15% would advise strongly against starting. None of the group surveyed felt that either personal search or the use of an intermediary searcher had influenced their reading habits, journal subscriptions or attendance at meetings.

I believe that we should assume that this group of end-users will always remain novices but that there is generally sufficient satisfaction with their own searches that most will continue. Those disappointed with their results after a search will likely benefit from further education.

END-USER SEARCHING

Several studies have been conducted to assess the effectiveness of end-user searching. Haines reported that 76.5% were moderately satisfied with the quality of their searches. When comparing the results of their searches with those of an intermediary, end-users preferred the latter.[7] Kirby and Miller in a 1986 study, compared end-user search results with those conducted by themselves on the same subject. BRS Colleague was the search vendor used. In 60% of searches end-users found the intermediary result better. Of the Colleague searches initially judged successful by the end-user, 54% were missing key articles during a follow-up search.[8] These are only two examples from the fairly extensive literature describing investigations in this field.

The problems identified have been described predominantly as difficulties with Boolean logic, and in particular, difficulty with the contradiction between the grammatical and the logical 'AND' and 'OR'. The other main problem is "unfriendly" search software. While "friendly" software has been criticized as increasing the cost telecommunications charges, to the casual and novice searcher a simple and friendly system will increase the yield and satisfaction. The National Library of Medicine has come closest to the ideal low-cost, user-friendly software with Grateful Med Version 3.0.

The cost of searching has a significant effect on the frequency of searching. In a Michigan study, Crooks found that 99% of participants would use a free service but only 56% would if a $10 fee were imposed.[9] Numerous other authors have confirmed the cost ramifications of end-user searching.

Some suggested solutions for improving the way in which medical scientists access the biomedical

literature are as follows:

a. provide training but at the same time have resource librarians available to assist the end-user. There are several studies that support the preference of end-users to have a librarian on hand to assist with the search strategy.[10] This scenario would likely result in a different role for the reference librarian. There is evidence, not surprisingly, that those who receive some training in online catalog use report more satisfaction with the returns obtained from their searches.

b. the training format should include the use of text material combined with computer assisted instruction (CAI). The text supplied is essential for future reference and cannot be superceded by other formats of instruction. All new trainees should have their search strategy approved by the teacher before going on-line. Ideally, the user should be taken "by the hand" for the first search.

c. CD-ROM (Compact Disc - Read-Only Memory) technology offers access to bibliographic databases without the online connect costs. It is possible to provide this service at low cost in a library. Generally, with training there is a high rate of user satisfaction.

CONCLUSION

Within the last few decades, powerful forces have radically changed the way that health care is delivered. The explosion of knowledge in the basic medical sciences makes it a formidable task to keep abreast of current developments. Advances in computer technology have radically changed the way in which the literature is organized, and the way in which it can be accessed. For those scientists who are educated in the techniques of searching, communication with librarians will be improved and this will enhance the quality of literature searches.

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CATALOGUERS AND DINOSAURS: WHAT DO THEY HAVE IN COMMON?

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Originally, I imagined that this talk was going to be a light-hearted generally humourous account of what cataloguers do, and why they do it. However, the more I read, and the more I pondered on the topic, the less funny it became. The saving grace may be that it is not overly erudite either - it is my own personal viewpoint of cataloguing, where it is at within the profession, and my hopes and aspirations about where I would like to see it go.

WHY DINOSAURS?

"Why dinosaurs?" No, I don't think we look alike! The only remotely connected item of Brontosaurean proportions that I can relate to cataloguers may be the data bases that we manage and maintain. There is also no comparison when it comes to length of existence. It is humbling when one considers that the dinosaurs were the dominant form of life of earth for 140 million years. The human race, much less the cataloguer, will indeed be fortunate if it survives for an equivalent time span.

This is an abridged version of a presentation given at the annual dinner of the Friends of the School of Library and Information Science, University of Western Ontario, on February 5, 1988.

For my own protection, I suspect it may be unwise to make further comparisons, especially on such trivial facts as that dinosaurs were both slow moving and had small brains!

So what do we, the cataloguer and dinosaur, have in common? **Success!** Because dinosaurs are extinct they are often considered to be failures. In fact the opposite is true. With the breakup of the great landmass Pangaea about 200 million years ago, dinosaurs had to evolve and adapt to a world literally falling apart, as continents moved, mountains rose and fell, and seas first inundated and then subsided from the land. Although the challenges facing cataloguers could not be said to be of such gigantic proportions or of the life-threatening type, I do submit that they too have been successful in adapting to a constantly changing environment. An examination of library literature of recent years provides evidence for the fact that cataloguing as a professional activity is in fact withering away. Before examining some of the reasons for this, I must state that I firmly believe that the cataloguer story is a success story! - one of the greatest success stories in librarianship in this century.

All the major developments in

sharing cataloguing data have occurred as a result of the cooperative efforts of cataloguers and cataloguing groups. The international standards for bibliographical description (the slashes, dashes, hyphens, etc.), the adoption of standards for description and access (the infamous AACR2), and the development of standards for the exchange of machine-readable cataloguing data (the MARC formats) all enabled the increased widespread sharing of cataloguing data both at the national and international level. Developing technology merely speeded up and aided this process of increased standardization which is essential for the sharing of cataloguing records. The adherence to standards, the sharing of authority work, and the exchanging and linking of records housed in separate bibliographic utilities are the result of the desire by both administrators and cataloguers that the cataloguing process for a given item need not and should not be repeated in every library that obtains that item.

The impetus for these developments has of course been primarily financial - the need to make cataloguing cost-effective by avoiding duplication of effort. The end result of this tremendous cooperative effort is that approximately 90% of the cataloguing done in large research libraries is based on cataloguing copy obtained from other sources - from the national cataloguing agencies such as the Library of Congress, the National Library of Canada, the British Library, and the National Library of Medicine; as well as from members of bibliographic utilities such as UTLAS, OCLC, RLIN, etc.

DECLINE OF THE CATALOGUER

The irony of all of this is that such a success story sowed the seeds of destruction for the professional cataloguer. Ruth Hafter in her book **Academic librarians and cataloging networks: visibility, quality control, and professional status** provides some indication that this may indeed be a widespread phenomenon.

"In five of the six libraries where I interviewed catalogers, administrators, and other staff members there had been an overall decline in the size of the cataloging departments during the past decade. In general, fewer professional catalogers were employed, but the reduction in their numbers was not as great as in the number of clerks whose very routine jobs (e.g. typing catalog cards) had largely been eliminated by the computer. Many deprofessionalizing trends were evident, however. Even in those departments that suffered little or no attrition in the number of professional positions, it was clear that the role and career expectations of the cataloger had greatly diminished. At Stanford, for instance, no new cataloger had been hired for seven years. At San Jose, the last original cataloger had been hired in 1980 and overall the department had suffered a one-third cut in personnel during the past decade. At San Francisco State, the last cataloger had been hired more than 10 years ago; at Sonoma State, over 15 years ago. At Berkeley and the University of Washington, which both have huge libraries, there had been some recent hirings, but for very specialized areas. The overall number of catalogers had declined. More important than the numbers count was the almost

unanimous view expressed by the catalogers that their status in their specific institutions, and in the library profession in general, was in a process of drastic decline."[1]

What are the factors that have contributed to this pessimistic view? Since the introduction of shared or network cataloguing, library assistants have become responsible for producing the bulk of cataloguing. The cataloguing copy that is located during data base searches is for the most current and "in demand" books and other library materials. This is the type of item most quickly processed by the Library of Congress (LC), and most libraries accept LC cataloguing with little or no revision. If Library of Congress has not catalogued the item, then some other large research library participating in a bibliographic utility or network will have done so. What this means is that current English language materials that are easy to catalogue and/or important, or in great demand, will quickly receive some form of cataloguing. Such copy can be processed by library assistants in a fairly routine manner. Approximately 80-90% of current important English language material is processed by library assistants.

Because the remaining 10% of the total current acquisitions is "low profile" material, the cataloguers' self-esteem, as well as the esteem with which they are held within an individual institution is affected. Despite the fact that such material often requires specialized language skills and in-depth subject knowledge in order to provide adequate cataloguing so that the materials become usable, cataloguers are still seen to be working on left-overs - "the dregs" as the Stanford cataloguers have nicknamed this category of material.

In addition, instead of working or specializing in language or subject areas, the original cataloguer now has to work in several subject areas because there are not enough items that require original cataloguing in most disciplines to provide for subject specialization. As a result, the professional loses mastery over the literature in a given area. This loss of control and knowledge slow the cataloguer, and it becomes extremely stressful as cataloguers must then exert extra effort to provide correct subject analysis and still maintain production statistics. As an example of this trend, at the University of Western Ontario (UWO), the original cataloguer assigned to catalogue science materials, including health sciences, has the responsibility for original cataloguing in approximately 30 subject areas starting with anaesthesia, anatomy, biochemistry, biophysics, botany, clinical neurological sciences, communicative disorders, dentistry, diagnostic radiology & nuclear medicine, nursing, obstetrics & gynaecology and so on alphabetically through to zoology! For comparison, there are six collections librarians to select and manage the collections development of the same areas.

Finally, we have in general the lack of esteem in which library peer groups and administrators hold cataloguers. On the one hand public service librarians cry that cataloguers are not providing a catalogue that serves user needs. The criticism seems to be that cataloguers are more interested in applying rules pedantically and not interested in doing what is best

for the user, or for their peers in public services. On the other hand the library administrators press for speed and production, so that less time can be spent tailoring the catalogue to local needs. The cataloguer is caught in the middle!

ARE CATALOGUERS ZEALOTS?

Many cataloguers look on this current trend as being one of deprofessionalization, because much of the traditional cataloguing work either has been or will be performed increasingly by library assistants. I do not happen to believe that the enhanced status of library assistants means the deprofessionalization of cataloguing. In fact I believe that it has done the opposite. Heaven forbid that we should return to the days of the painfully slow, hand transcribing of every last full stop and comma to cataloguing worksheets for others to input. In fact, at UWO we have probably gone one step further than most libraries in that we have the library assistants set up the cataloguing record for all books. They provide all of the bibliographical description plus name and title access points. The items are then routed to the professional cataloguer who reviews the record to ensure the access points are in accordance with the rules and/or local cataloguing policy, in addition to providing subject analysis - that is the classification number and subject headings. Unfortunately this 'enhanced' knowledge level of cataloguing with its emphasis on subject and language as opposed to technical expertise does not seem to have been sufficient to reinstate cataloguing status, partially for the reasons I indicated previously - cataloguers have become generalists in their own specialty!

Hafter's conclusions from her study would also appear to hold little comfort for the cataloguer. She suggests that administrators appear to be moving toward a cataloguing standard stressing flexibility, utility, and economy, primarily because of the fact that user behaviour now can be observed on the computer terminal. There is pressure for library administrators to redefine quality control as response to patron needs rather than adherence to cataloguing codes which appear to produce overly detailed records containing information that users apparently do not require. At the same time Hafter maintains that a new breed of 'master cataloguer' has evolved as a result of the development of shared or network cataloguing. These master cataloguers continue to promote the need for standards, especially the adherence to the internationally accepted cataloguing code. She sees these two groups at odds with each other:

"Whether in fact they (library administrators) will be successful against the idealism and tenacity that cataloguers devote to perpetuating their codes, or against the organizational and technical expertise of network personnel, is still very much in question, and I personally doubt that they will prevail. History, after all, records far more victories for the zealot than the systems analyst or the cost accountant. Moreover, despite the fact that cataloguing standards and rules have been much maligned, the weight of evidence supports cataloguers' assertions that it is their expertise, their esoteric body of knowledge, that is responsible for patron success in locating materials in both card and online catalogues. Numerous studies have validated this conclusion."[2]

I am extremely perturbed by such statements as they appear to put administrators and cataloguers into armed camps opposite each other. I certainly do not consider myself a "zealot" who pedantically follows rule/code application before consideration of the public for whom we provide the service. In fact I know of no cataloguers who are "zealots" in that sense. All feel they are assisting, not hindering the user. If, however, cataloguers are isolated from their public service peers, and from the public whom they serve, then it is no wonder that the results do not reflect user needs, because the only guidance left to the cataloguer is the theoretical rather than the practical. Without direct access to users, or to public service peers in working situations, the details of what works and what does not work at the practical level are not relayed to the cataloguer. Department heads are more concerned with administrative issues, and the daily working details are often bypassed or lost in higher level administrative communications channels. As a result the cataloguer becomes more and more isolated from the users of the catalogue - the whole basis and rationale for the existence of the catalogue.

Having taken many years of hard work and effort to devise standardized cataloguing and coding principles which, once mastered, are relatively easy to apply and which do provide a consistency in our catalogues, why discard them simply because, at present, the user does not utilize all the details within the records? If we had the computing capability, a catalogue user would be able to obtain, for example, a bibliography of French language materials (which also contain bibliographies) published in Ontario between the years of 1980 and 1985. What a help such a service would be to the bibliographer! All such information is coded into our catalogue records for that future time when the technology catches up with our old fashioned standardized records! In addition, if we had the system capabilities, cataloguers could leave out of the record all those details which have been considered excessive: e.g. notes regarding bibliographies, indexes, conference proceedings, etc. as the information is already coded for computer manipulation elsewhere in the record. In fact I further suggest that any application of cataloguing and coding principles today must be made in relation to a catalogue system's capabilities. For example, if Boolean search is available for the patron, then many separate index/access points are no longer necessary in the catalogue record.

SUGGESTIONS FOR THE FUTURE

Hopefully, Hafter's zealots will become a little more flexible, and library administrators will think twice before throwing standards to the four winds. However, it is obvious that there will be no return to "the good old days" of the cataloguing professional. In a climate of budgetary restraint, standardized cataloguing will remain, and in view of the increased emphasis on shared cataloguing, the amount of original cataloguing may well decrease further. Will professional cataloguers survive or is there danger that they too will become extinct as did the dinosaur? Perhaps 'extinct' may be too strong a word, as it will be necessary to have cataloguers at the national library level, or in the large research and public libraries-someone is going to have to do the

cataloguing! And I too would like to keep my job supervising library assistants - I quite like telling them what to do! However, at the local level I do see major problems in the future. How do we attract professionals into a 'dying' area? At some time in the future when our experienced cataloguers retire, who will be sufficiently well trained to take their place? I personally would like to see some evolution or adaptation take place, so that we are prepared for that eventuality.

If library administrators, public service professionals, and cataloguers all wish to provide a genuine public service, then the best course of action would appear to be to spread the responsibility and to utilize all professional staff across all functions. In small libraries, the professional has long been the collections, reference and cataloguing specialist "all in one" - the concept is neither new nor radical. At the large research library level, at least one library has demonstrated success in this area. The University of Illinois at Urbana-Champaign Library decentralized the original cataloguing process over a 4 year period from 1982 to 1985. The decentralization called for the dispersal of professional staff and activities from two general service units - Original Cataloguing and Collection Development/Preservation - into several Departmental Library Services where public service personnel were trained to perform original cataloguing and collections functions, and vice versa.[3] Obviously such a major change did produce its own problems. To me at least it is a more logical use of professional staff resources, which I suggest has several benefits:

First: We would be able to supply better subject analysis for materials catalogued locally. With nothing more than my common sense as justification, I suggest that by having five subject specialists providing subject analysis for items previously catalogued by one cataloguer, there must be a better quality product. Second: Although it is necessary to accept the standardized product of shared or network cataloguing, more changes could be made to accommodate local patron needs, provided the workload was shared among several professionals. Third: Working with peer group professionals with a variety of expertise, allows for what I call cross-fertilization of ideas. There would be a much better understanding of what local user needs should, or could be accommodated in local cataloguing policies. And there certainly would be much greater agreement concerning priority setting. Fourth: Decentralization would promote job responsibility/satisfaction. The professional who selects an item would become responsible for ensuring that item is accessible in the best possible manner. There would no longer be a cataloguer who could be blamed for losing an item in a collection because it was inappropriately classified or indexed.

Obviously change will not come easily. Perhaps the best place is to begin in the library schools. I'm not convinced that advanced cataloguing courses are necessarily in the best interests of the profession as a whole if students view cataloguing as a dead end job. I suspect that all of the traditional functions will have to become integrated or intertwined much further into the courses designed to teach the technological aspects of information retrieval, i.e. in the

systems and computer courses. In the workplace, whether or not there should be a wholesale decentralization programme as at Urbana-Champaign, or whether a more gradual integration is preferred will probably depend greatly on the attitudes and flexibility of the professionals and administrators in an individual institution. Being the eternal optimist, I believe it can be done in a constructive, cooperative manner that will bring benefits to everyone.

One current theory concerning dinosaurs is that they became extinct as a result of some cataclysmic event. To date, cataloguers are still surviving and it is to be hoped that no such event will bring about their demise. While there is life there is still hope for evolution!

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GRATEFUL MED: SEARCHING SIMPLIFIED FOR THE CLINICIAN AND LIBRARIAN

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Since its release in early 1986 GRATEFUL MED and its succeeding versions have been reviewed for their virtues and limitations in both the medical and library literature.[1-4] We would like to describe the improvements and changes to version 3.0, relate our experiences in teaching clinicians how to use GRATEFUL MED, and discuss its potential role in the small library.

GRATEFUL MED is a single purpose package designed for clinicians to easily and efficiently access the MEDLINE and CATLINE databases and (with version 3.0) the other MEDLINE databases including AVLINE, CANCERLIT, CHEMLINE, DIRLINE, HEALTH, TOXLINE, TOXLIT, and TOXLIT65. Search strategy is formulated offline on a database specific form screen with built in MeSH (Medical Subject Headings) available at the touch of a keystroke, and automatic reformatting of other input to the specifications required by the search software. Thus spelling errors and clumsy typing skills do not affect the actual cost of searching. Telecommunications are part of the package; GRATEFUL MED signs on, downloads the retrieved references and signs off. The user can then send all or only the citations he or she wishes to printer or disk. Searches can be edited for running again if needed and searching the backfiles is easy and quick.

Equipment requirements for GRATEFUL MED include an IBM or compatible computer with either a hard disk or a 2 floppy disk system. For telecommunications a Hayes or Hayes compatible internal or external modem is needed. GRATEFUL MED will run at 300, 1200, or 2400 baud. A regular telephone line with a standard jack in either pulse or tone is sufficient. A fairly fast dot matrix or inkjet printer is recommended.

TEACHING HEALTH PROFESSIONALS

Interest in end-user online searching is spreading quickly in the medical world. At McMaster, in conjunction with the staff of the Health Sciences Library, we have trained over 300 health care professionals to do their own MEDLINE searching. The majority of users are from the McMaster community but we have had participants in our classes from outside Hamilton including Napanee, North Bay, Sioux Lookout, and Thunder Bay. We have even had interested people from Newfoundland ask about our classes.

We began teaching MEDLINE searching three years ago using NLM direct searching (native) mode, finding this route less expensive than some of the more user-friendly packages and services.[5,6] We now teach strictly with GRATEFUL MED, having found that clinicians can learn to perform successful searches after two hours of class time in a group of ten or so people plus one hour of 'one-on-one'. During 'one-on-one' sessions, a user searches with one of us in attendance should he or she require assistance.

The content of our teaching sessions is mostly practical. We explain the history of MEDLINE and Index Medicus, their size and coverage; then concentrate on the unit record and the concepts of Boolean logic and indexing policy and procedures. We also mention exploding and limiting but find that participants gain a better understanding of these concepts during their 'one-on-one' session. Subheadings are searched 'bald' when using GRATEFUL MED so we do not discuss subheadings in the context of their allowable categories unless we are asked about them. This portion of the course takes about twenty minutes and the rest of the time is spent searching. We perform the first few searches explaining all the steps and the class members search their own questions for the rest of the class period. We use a Zenith laptop computer connected to a Sayette projection panel which projects the computer screen on to the wall so that all class participants can easily see the computer interaction.

In addition to hands-on searching and printed material with searching tips, we offer copies of GRATEFUL MED for sale to participants at cost to save them the time of ordering it individually from NTIS. The staff of the Health Science Resource Centre (HSRC) at the Canada Institute for Scientific and Technical Information (CISTI) also supplies password application packages which we distribute to those users eager to get started on their own.

Not everyone who attends the online searching course goes on to do his or her own searching. Those who do not have at least learned how to pose better formulated search questions for the librarians who run their searches. Of those who do obtain passwords some come back (or go to HSRC) to learn the finer points of MEDLINE searching both with GRATEFUL MED and with the NLM direct system, and some go on to access other databases.

A few of the recurring problems encountered by beginner searchers include use of the MeSH screen, exploding and the subheading 'therapy'. Searchers often type in 'treatment' on the form screen instead of choosing 'therapy',

'diet therapy', or 'drug therapy' from the MeSH screen. The National Library of Medicine is considering mapping the word 'treatment' to all of the therapy subheadings so that 'treatment' will not be searched on solely as a textword. Beginners tend to forget to use the F10 key for finding MeSH terms. If they type in a compound word on a subject line of the form screen, GRATEFUL MED "OR's" the words together. New searchers also have trouble with exploding. GRATEFUL MED permits exploding from the MeSH screen but does not indicate which terms are explodable or where they fit in the tree structures rendering the concept even more difficult to grasp. However, exploding, subheadings and searching for starred (*) MeSH terms are all explained in the help screens.

We feel that our course is a bargain at $40 per person for the two sessions. HSRC often provides passwords for the large group sessions. We are greatly impressed with the enthusiasm of the participants, which renders our course extremely satisfying to run.

GRATEFUL MED IN THE SMALL LIBRARY

As well as being an effective online training package, we feel that GRATEFUL MED can also be useful in the smaller health sciences libraries for both librarians and clinicians. The librarians will appreciate GRATEFUL MED's simple installation process; no need to worry about stop bits, data bits, or parity checks. The program even corrects the files if you have told the program that the modem is in the wrong COM port. All one needs to know is the Datapac telephone number (usually in the telephone book and sent from CISTI) and the userid/password from CISTI.

The sign on procedure is the 'weak link' in the program. It often fails to sign on when requested and then refuses to reset the modem. NLM knows there is a problem signing on, but has not been able to make the sign on more reliable. Hopefully new versions of GRATEFUL MED will rectify this problem. In addition to the problem of signing on, the package is limited to searching only the NLM databases. Another software package is needed to search other non-NLM databases through Dialog, BRS and other companies, or to use electronic mail or bulletin board services.

Although the form screen is useful for beginner or occasional searchers, librarians will find it less precise than interactive searching. The built-in MeSH is alphabetical and indicates cross references but gives no tree structure information, making the 'explode' capability somewhat of a guessing game. Experienced librarian searchers can bypass the form screen to search NLM directly, and still partake of GRATEFUL MED's downloading and reformatting features.

GRATEFUL MED also incorporates one of the least expensive telecommunications packages on the market. Every searcher needs such a package to get the modem to work, and at $40 this one is far less expensive than other general purpose telecommunications packages such CrossTalk Mk4 or single purpose searching packages such as MedBase.[2]

Another benefit to the library is GRATEFUL MED's sign on capability which can be set to ask for a searcher's userid/password. Thus a small library with limited hours of service but a large number of

search requests (or searchers) can provide a do-it-yourself searching service and not need to worry about the billing. Interested users would obtain their own passwords from CISTI and would therefore be responsible for their own searching charges.

CONCLUSION

We encourage librarians to offer online searching training with GRATEFUL MED to interested health professionals. Our classes have been easy and rewarding to run. To us it is a natural (and necessary) progression for librarians to move into more of a training and consultative role in online searching. Librarians can then take on more of the difficult questions or multiple database searching while at the same time encouraging interested clinicians and other health professionals to do their own simple everyday searching. The librarian who is swamped with search requests might find a great deal of interest (and personal satisfaction) from his or her library users for a short do-it-yourself MEDLINE course.

(Training material available on request from the authors, at the McMaster University Health Information Research Unit, Room 3N51, 1200 Main Street West, Hamilton Ontario L8N 3Z5.)

The authors thank the librarians of the McMaster Health Science Library, and the National Library of Medicine (USA) and the Rockefeller Foundation for grant support.

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A HEALTH LIBRARY IN NORTHERN ALBERTA: THE LEARNING RESOURCES CENTRE

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The Fort McMurray Regional Hospital Learning Resources Centre may not be typical of health libraries in other remote locations. It is equipped to provide a wide variety of services and resources directly or indirectly to its users. It also serves a wider range of user groups than many other health libraries. The hospital and its Learning Resources Centre recognize and support the importance of continuing education for staff and physicians.

BACKGROUND INFORMATION

Fort McMurray, with a population of about 33,000 people, is located 435 kilometres northeast of Edmonton. The city's main industry is oil sands extraction. Its only hospital, Fort McMurray Regional, serves the city as well as the surrounding area. Currently at 150 beds, it is constructed to permit expansion to 300 beds.

The Hospital's Learning Resources Centre (LRC) serves a diverse clientele. User groups include physicians (33 full-time, as well as occasional locums and visiting specialists who hold clinics in the Outpatient Services area); hospital staff (450), volunteers and auxilians; nursing students (44) and instructors (10) from the local community college two-year program; allied health groups (firehall-based paramedics, local Health Unit staff, occupational health and safety officers from the oil sands plants); and LRC liaisons with other libraries locally and beyond.

The LRC is run by one full-time librarian (B.A., M.L.S.), who is the LRC Coordinator. The LRC Coordinator reports to the Manager of Patient Documentation who in turn reports to the Vice-President, Paramedical Services. As well, the Coordinator is a sitting, voting member on both the LRC Advisory Committee and the Education (Nursing) Committee. Occasional volunteer or high school work experience assistance is provided to the LRC. A PEP (Priority Employment Program) person was placed in the LRC from November through April of the current year; this allowed the Coordinator to complete a number of outstanding projects.

Currently, the LRC is in the process of relocating from quarters of 79.89 square metres (860 square feet) to 123.55 square metres (1330 square feet) -- an increase in area of 55%.

THE LRC COLLECTION

The collection is an integrated one (medical / nursing / allied health

/ general hospital), which is classified by the National Library of Medicine system. It consists of over 2,600 volumes (some texts are kept in satellite deposit collections); 150 journal subscriptions with five years of backfiles; reprints of pertinent provincial/federal legislation; a small audiovisual materials collection, which is gradually becoming integrated with the books; and a series of vertical files. The collection is developed through a materials budget of $18,200 (1988-1989 projection), of which $14,200 is allocated for subscriptions and $4,000 for books. Due to provincial restraint policies in health care, there will probably be no significant funding increase to support collection development in the current year. This has been the case for the past two years.

SERVICE FEATURES

In addition to "traditional" library functions, the LRC provides three additional services. First, bookings for both hospital conference room space and audiovisual equipment are centralized through the LRC. Second, the Coordinator serves as the site facilitator for three teleconferencing networks (Alberta Hospital Association and the Universities of Alberta and Calgary Continuing Medical Education) which together provide between five and twelve hours per week of programming for nine to ten months of the year. Third, an in-house computer training centre is being developed in the LRC, using both CAI modules and training modes of records on the hospital's mainframe system.

Given the restrictions in funding, staffing and physical premises, the LRC uses a number of resources to optimize service for its users. The Coordinator accesses the MEDLARS databases (ie. MEDLINE, CATLINE, and AVLINE) through CISTI and performs searches on request. As well, the Hospital acts as a regional MEDLARS centre. An average of twelve requests are received per month, not all of which require MEDLARS searches. Abridged Index Medicus (AIM) in paper copy is maintained as a back-up and to permit users to search on their own.

As Fort McMurray's collection of materials cannot possibly meet all of its users' needs, the LRC makes steady use of interlibrary loan services (100-120 requests per month) for materials in all forms. These requests are made by mail or by telephone. Electronic mail is not yet available in the hospital, but would be an appropriate means of transmitting such requests. All charges for materials or shipping are absorbed by the LRC for its users. Fort McMurray also maintains a policy of reciprocity (i.e. it does not charge if it is not charged by an institution). Requests are sent across Canada or to the National Library of Medicine, depending on such factors as geographical proximity and location of the requested item.

With the significant costs of audiovisual presentations, items which are needed infrequently and which are not in the LRC's collection are borrowed from other institutions, as the costs of borrowing are far less than outright purchase. The local community college with its nursing program has developed its materials in nursing so the LRC has less need to have a comprehensive nursing collection. The two collections attempt to complement each other, overlapping

mainly for core items.

Although the librarian relies primarily on the series of Brandon and Hill lists for collection development, interlibrary loans also help in this area. Non-list items are often borrowed from other libraries, or, in the case of journals, reprints of contents pages are obtained for evaluation.

To facilitate communication between the hospital and other centres, the hospital maintains a direct telephone line to Edmonton. It has access to the WATS (Wide Area Telephone Service) telephone network. Telefacsimile equipment has just been installed and the addition of electronic mail through ENVOY is presently being investigated. These measures greatly reduce the problems inherent in a geographic location such as Fort McMurray's, as communication with other centres is allowed without the costs of such interaction becoming an overriding issue.

Contact with other librarians and libraries is maintained in a number of ways. There is intra-city cooperation among local libraries and librarians, including an informal association. The LRC Coordinator maintains memberships in a range of associations to keep up with current trends and issues, as well as to maintain contact with other health librarians. These include the Canadian Health Libraries Association and its Northern Alberta chapter; the Medical Library Association, its Pacific Northwest Chapter and Hospital Libraries Section; the Canadian Library Association; and the Library Association of Alberta. The Coordinator visits as many health and hospital libraries as possible. For reasons of distance and convenience, these site visits are scheduled in with other business trips, in particular with trips to Edmonton for teleconferencing site facilitator duties. Site visits are a valuable means by which both parties can exchange ideas, advice and services, and once such contact is made, further interactions are more meaningful.

IN CLOSING

Despite what appears to be a significant geographical barrier, the Fort McMurray Regional Hospital LRC services to its users are more complete than might be expected. The main barrier faced is the time required to request and receive from other libraries materials not held in the LRC. Second, the funding crunch which affects all health care services in the province severely limits acquisitions of materials and increases the priority given to interlibrary loan services. Third, there is an element of professional isolation from other health librarians working in Fort McMurray. This is greatly reduced by reading the professional literature and by contact with colleagues whenever and however possible. As a "one-person" library, with ancillary duties, there is never a dull moment!

NEWS AND NOTES

FRANCES GROEN NEW MLA PRESIDENT-ELECT

Frances Groen, Life Sciences Area Librarian at McGill University has recently been elected as President of the Medical Library Association for 1989/90. The Medical Library Association, which has over 5,000 members, is based in Chicago. This is the first time that a Canadian has been elected to this prestigious office since 1935/37 when another McGill librarian, Dr. W. W. Francis of the Osler Library, was President of the Association.

It is of interest to note that, since the association was founded in 1898, there have been three previous Canadian Presidents, Sir William Osler, Dr. C.F. Wylde, and Dr. W. W. Francis. All three, the Association's founding Secretary, Margaret Charlton, and its only Honorary President, Dr. F. J. Shepherd, have come from McGill University.

CANADIAN ASSOCIATION OF THE HISTORY OF NURSING IN CANADA (CAHN)

The first meeting of CAHN was held on June 8, 1987 in the Jean I. Gunn Memorial Library, Faculty of Nursing Building, University of Toronto. Co-founders of this Association are Dr. Margaret Allemang and Dr. Barbara Keddy; the group has 28 charter members. The Association will hold the first Canadian Nursing History Conference on the evening of June 15, and all day June 16 at the Prince Edward Hotel in Charlottetown P.E.I. Dr. Monica Baly, author of **Florence Nightingale and the Nursing Legacy**, will be keynote speaker.

Regular membership in the Association is $35 (Can). To enroll, or for further information, please contact:

Jean Sillars, Treasurer CAHN
12 George Street
Campbellton, New Brunswick
E3N 2Z7

REMINDER - CHLA/ABSC 10TH ANNIVERSARY AWARD

This award of $500 to CHLA/ABSC Chapters is offered to further the mission of CHLA/ABSC. This is a reminder to Chapters that, to receive consideration, nominations for this year's 10th Anniversary Award must be submitted before the June 11 meeting of the CHLA/ABSC Board, preferably as far in advance as possible. Information and rules governing the award can be found in **BMC** 8(3):114-115. For further information please contact the President or any other member of the CHLA Executive.

PEOPLE ON THE MOVE

BETTY BISHOP, former Director of the Health Sciences Library, Grey-Bruce Regional Health Centre, has left the field of health sciences librarianship. While at Grey-Bruce, Betty also served as President of the Central Ontario Health Libraries Association. Her successor in that position is **JEAN CORNETT**.

KATHY DEGUNS, who is new to the health libraries field, has been the librarian at Hogarth-Westmount Hospital in Thunder Bay since February 1988.

SUSAN HIGGINS, formerly at the Health Promotion Branch of Health and Welfare Canada, is now Librarian at the new Federal Centre for AIDS Library, 301 Elgin St., Ottawa K1A 0L2.

COLIN HOARE was appointed Corporate Information Officer of Hoffmann-LaRoche Limited in the fall of 1987, in addition to his current position of Head of Scientific Information.

HELEN HYVARINEN is the new library technician at Lakehead Psychiatric Hospital in Thunder Bay, Ontario.

LARRY LEWIS, Librarian of the Sciences Library at the University of Western Ontario, will be resigning his position effective the end of June, 1988. Larry is leaving the health sciences field after eleven years as UWO's Sciences Librarian. His many friends and colleagues wish him well in his future endeavours.

Appointed last September, the library technician at McKellar General Hospital is **CAROL SCHMALTZ**. Carol is also president of CHLA's new chapter, the Northwestern Ontario Health Libraries Association.

MARGARET TAYLOR has resigned from her position at the Children's Hospital of Eastern Ontario in Ottawa, effective May 13, 1988. As of July 1988, she will be completing her PhD at FLIS; acting as Librarian /Researcher at the Continuing Education Office, Faculty of Medicine, University of Toronto; and teaching the Collections Development course at FLIS.

ANNE WALKER, who is currently on leave of absence in Holland, has announced her resignation from the position of Collections/ Online /Reference Librarian at the University of Western Ontario's Sciences Library.

IN MEMORIAM

LAURENT-G. DENIS

Laurent-G. Denis, professor at the Faculty of Library and Information Science, University of Toronto, died in Toronto on December 11 following a brief illness. Professor Denis will be sorely missed by his colleagues, students and former students and by his many friends within and outside the library profession.

After receiving his BA from Loyola College, Professor Denis obtained his BLS and MLS from McGill University. His first professional position was with The National Library of Canada, followed by four years with the Collège Militaire de Saint-Jean. In 1960 he became the first director of the Ecole de bibliothéconomie et des sciences de l'information of the Université de Montréal, a post he held until 1970. In 1986 he was presented with the Université's Medal of Merit in recognition of his services to the Université and the library community.

In 1970, after receiving his PhD in library science from Rutgers University, he joined the University of Toronto's Faculty of Library and Information Science as professor. From then until his death Professor Denis played an active role teaching, writing, researching and consulting. His fields were library administration and special libraries. For the past several years he also organized the Faculty's highly successful Continuing Education program.

Professor Denis was a gregarious man with a great zest for living. His talent for organization, his sound judgement and the generosity with which he offered his time and energy will make him sadly missed by all who worked with him at FLIS and by his colleagues in the many professional associations in which he played an active role.

In his honour **The Laurent-G. Denis Scholarship** has been established. Donors may send contributions, payable to the University of Toronto, to Dean Ann H. Schabas, Faculty of Library and Information Science, University of Toronto, 140 St. George St. Toronto, Ontario, M5S 1A1. Receipts for income tax purposes will be sent to all donors.

FROM THE HEALTH SCIENCES RESOURCE CENTRE

Maureen Wong

Head, Health Sciences Resource Centre
Canada Institute for Scientific and Technical Information
Ottawa, Ontario

STAFF CHANGES - A NEW DIANNE

Dianne Kharouba, whom many of you have met or spoken to on the phone, has left HSRC for another position at CISTI. She is at present Head of CISTI's Sussex Branch Library. In Dianne Kharouba's place is Dianne Pammett, who returned to work in December 1987 after a 3 year leave of absence. Dianne worked in CISTI's Reference Department for 6 years prior to her leave. In 1984 she was seconded to HSRC as a maternity leave replacement for Suzanne Maranda. In addition to providing user education, Dianne is responsible for MEDLARS SDI's, reference, literature searches and collections development.

FLOWER REPORT - FRENCH TRANSLATION

As mentioned in the last issue of BMC, CISTI has assumed responsibility for the French translation of M.A. Flower's LIBRARIES WITHOUT WALLS: BLUEPRINT FOR THE FUTURE. The translation has now been completed. The printing and distribution of the translated copy will be handled by CHLA.

GRATEFUL MED

Version 3.0 of the GRATEFUL MED front end software package has now been released. Purchasers of the Version 1.0 or 2.0 will automatically receive free of charge the new improved version from the U.S. National Technical Information Service (NTIS).

This new version incorporates the following enhancements:

- In addition to MEDLINE and CATLINE, the user-friendly interface allows access to seven more MEDLARS databases: AVLINE, CANCERLIT, CHEMLINE, DIRLINE, HEALTH, TOXLINE, TOXLIT/TOXLIT65
- simplified installation procedures
- improved HELP screens
- improved access to INPUT screens

Contact us if you require more information on GRATEFUL MED.

NEW BIBLIOGRAPHIES

HSRC, from time to time, compiles and updates bibliographies on online searching (particularly MEDLINE). Our recent lists include:

° Personal Computers for Online Searching: a bibliography. (Revised - February 1988).
° GRATEFUL MED: bibliography. (New - January 1988).

We will be happy to supply upon request copies of these bibliographies. As well, suggestions for additions and improvements are welcome.

DU CENTRE BIBLIOGRAPHIQUE DES SCIENCES DE LA SANTE

Maureen Wong

Chef du Centre bibliographique des sciences de la santé
Institut canadien de l'information scientifique et technique
Ottawa, Ontario

CHANGEMENTS DE PERSONNEL: UNE NOUVELLE DIANNE

Dianne Kharouba, que vous avez pu rencontrer ou à qui vous avez peut-être parlé au téléphone, a quitté le CBSS pour un autre poste au sein de l'ICIST. Elle a été nommée chef de la bibliothèque-annexe de la promenade Sussex.

Dianne Pammett, qui est revenue au travail en décembre 1987 après trois années d'absence, occupera désormais le poste laissé vacant. La "nouvelle" Dianne a déjà travaillé au Service de référence de l'ICIST pendant six années avant son congé trois ans. En 1984, elle avait été détachée au CBSS pendant le congé de maternité de Suzanne Maranda.

En plus de s'occuper de la formation des utilisateurs, Dianne est chargée de la DSI dans le MEDLARS, de la référence, des recherches documentaires et de l'enrichissement des collections.

VERSION FRANCAISE DU RAPPORT FLOWER

Comme mentionné dans le dernier numéro du BMC, l'ICIST a assuré la traduction en français du rapport de M.A. Flower intitulé, "BIBLIOTHEQUES SANS FRONTIERES: PROJET D'AVENIR". La traduction a maintenant été complétée. L'impression et la diffusion du rapport en français relève de l'ABSC.

GRATEFUL MED

La version 3.0 du logiciel frontal GRATEFUL MED est maintenant disponible. Ceux qui ont déjà acheté la version 1.0 ou 2.0 recevront gratuitement la nouvelle version améliorée du National Technical Information Service (NTIS).

Cette nouvelle version comporte les améliorations suivantes:

- En plus de permettre la consultations de MEDLINE et CATLINE, cet interface facile à utiliser permet d'accéder à sept autres bases de données du MEDLARS: AVLINE, CANCERLIT, CHEMLINE, DIRLINE, HEALTH, TOXLINE, TOXLIT /TOXLIT65
- des procédures d'installation simplifiées
- de meilleurs écrans HELP
- un meilleur accès aux écrans INPUT

Communiquez avec nous si vous avez besoin de plus amples informations sur le logiciel GRATEFUL MED.

NOUVELLES BIBLIOGRAPHIES

Il arrive que le CBSS compile et met à jour les bibliographies sur la recherche en direct (particulièrement MEDLINE). Notre dernière liste comporte les ajouts suivants:

° Personal Computers for Online Searching: a bibliography. (révisée, en février 1988).

° GRATEFUL MED: bibliography. (nouvelle, janvier 1988).

Il nous fera plaisir de vous fournir, sur demande, des copies de ces bibliographies. En outre, les suggestions d'ajouts et d'améliorations sont bien accueillies.

MEETINGS/WORKSHOPS

CHLA/ABSC 12th ANNUAL MEETING
Location: The Citadel Halifax, Halifax N.S.
June 11-15, 1988

The keynote address will be "**Scientific Medicine - Success or Failure?**", presented by Dr. David Horrobin. The program includes sessions on the Integrated Academic Information Management System (IAIMS), Workload Measurements Project, hospital library standards, "Libraries without Walls" (Flower Report), and technology and CISTI updates; as well as continuing education opportunities and exhibits.

A welcoming reception will be held on the "Harbour Queen" as it cruises Halifax Harbour.

The all-inclusive conference registration fee is $90 (Can) for CHLA members; $110 (Can) for non-members. **Registration deadline is May 15.**

For further information, contact:

Linda Harvey, Conference Secretary
W.K. Kellogg Health Sciences Library
Sir Charles Tupper Medical Building
Dalhousie University
Halifax, Nova Scotia
Canada B3H 4H7

TEL: (902) 424-2483

CE 17 DEVELOPING IN-HOUSE DATABASES
Location: Salon 5, The Citadel Halifax, Halifax N.S.
Sunday June 12, 1988: 9:00 - 5:00

Instructor: Jane Beaumont, Library and Information Systems Consultant

This workshop will address the steps to be taken in developing an in-house text or bibliographic database. Topics to be discussed include: needs assessment, selecting software and hardware, design of the record structure and access points, implementation, conversion of existing records and ongoing management of the system. Some existing microcomputer packages will be discussed and there will be an opportunity to participate in a case study.

Target: Academic; Large Hospital; Special Library
Course Fee: CHLA Member - $90.00 (Can), Non-member - $110.00 (Can)

CE 18 PUT IT IN WRITING: WRITING SKILLS FOR MANAGERS
Location: Salon 6, The Citadel Halifax, Halifax N.S.
Sunday June 12, 1988: 9:00 - 5:00

Instructor: Eileen Pease, President of Dynamic Learning, a company devoted to enhancing personal skills and growth in reading, writing and thinking.

Nearly everyone in the workplace is required to communicate with written words. This workshop will show you how to turn your all-purpose writing skills into specific and targeted precision tools that will help you to be understood and appreciated. Business writing is a discipline that demands that you get to the point immediately and directly. You will be taught to organize your thoughts so that your communications will assume a logical and well thought out appearance. Good writing skills will help you impress your readers, and generate support and acceptance for your ideas and projects.

Target: All

Course Fee: CHLA Member - $90.00 (Can), Non-member - $110.00 (Can)

CE 459 ONLINE BIOCHEMICAL SEARCHING IN THE HEALTH SCIENCES
Location: Salon 5, The Citadel Halifax, Halifax N.S.
Wednesday June 15, 1988: 9:00 - 5:00

Instructor: Bonnie Snow, Biomedical Information Specialist, Dialog Information Services

An introduction to online searching on biochemical topics; intended for individuals with experience on MEDLARS and other vendor systems.

- understanding biochemical nomenclature & terminology
- analyzing biochemical reference questions
- formulating search strategies
- comparing the databases

Target: Academic; Special; Large Hospital Library

Course Fee: CHLA Member - $ 90.00, Non-member - $110.00

CE 19 TRAINING YOUR STAFF
Location: Salon 6, The Citadel Halifax, Halifax N.S.
Wednesday June 15, 9:00 - 12:00 *

Instructor: Peggy Kenmey, Staff Education Director,
Saint John Regional Hospital

The objective of training is to bring about change - the increase in knowledge, acquisition of a skill or the development of confidence and good judgement. At some point every professional will have to tackle the training or orientation of staff members. This practical workshop will help you deal with any individual or group you must train: professionals, non-professionals, volunteers. It will also help you to identify training problems that currently exist and differentiate them from the discipline problems they appear to be.

Target: All

Course Fee: CHLA Member - $ 45.00, Non-member - $ 55.00

* If registration warrants, this course will be repeated in the afternoon session.

HEALTH SCIENCES RESOURCE CENTRE EDUCATION PROGRAMS
Location: Halifax, N.S.
June 16 - 18, 1988

The Health Sciences Resource Centre will be offering a series of programs in Halifax, following the annual conference of the Canadian Health Libraries Association. The program schedule currently stands as:

16 June 1988: Advanced Medline

17 June 1988: End User Searching

18 June 1988: End User Searching

For more details on the workshops and registration information, contact:

Mary-lou Veeken
Health Sciences Resource Centre, NRC
Montreal Rd., Ottawa, Ont.
K1A OS2

(613) 993-1604
ENVOY: CISTI.HSRC

CANADIAN LIBRARY ASSOCIATION CONFERENCE
Location: World Trade and Convention Centre, Halifax, N.S.
June 16-20, 1988

Preparations are well underway to host the 1988 CLA Conference at Halifax. A Conference Planning Committee, convened by Joan Brown-Hicks, Co-ordinator, Community Services, Halifax City Regional Library, has been meeting since February 1987.

The theme of the Conference is "**Libraries in the Information Marketplace**". Dr. William Converse, President of CLA has introduced the theme with a view to exploring the state of the 'information marketplace' which will focus on:

Is there a conflict between libraries' free public service and the marketing of information for profit?

Are bibliographic utilities and online commercial databases replacing librarians?

If the Information Marketplace assumes a profit motive, what will be the impact on society's economically and educationally disadvantaged?

Are more efficient, instant access methods establishing standards which traditional libraries cannot measure up to?

How can we run more efficient libraries and continue to make libraries a vital part of Canadian culture?

Can libraries survive free trade in the Information Marketplace?

The conference site will be the World Trade and Convention Centre, one of the newest and most distinctive landmarks in the heart of downtown Halifax. The Convention Centre offers world class facilities for the delegates, and is connected by an underground walkway to Prince George Hotel, the designated Conference hotel. It is conveniently located and is close to many hotels, shops, restaurants, lounges, bars and other entertainment facilities.

For registration and further information contact:

Canadian Library Association Headquarters
200 Elgin Street, Suite, 602
Ottawa, Ontario. K2P 1L5
Tel: (613) 232-9625
ENVOY: CLAHQ

MEDICAL LIBRARY ASSOCIATION 88TH ANNUAL MEETING
Location: New Orleans, Louisiana
May 21 - 26, 1988

The first plenary session features presenters debating the economic and intellectual value of information in terms of the strategic management of libraries. The second plenary session will look at changes in the library and its environment with an eye towards management implications.

Sharing Sessions and Expo '88 demonstrations further expand the practical relevance of the meeting by highlighting new roles, directions, and trends in health information science. A huge Exhibit will show new products and services for practicing professionals in health information science.

Opportunities for continuing education include five new and revised CE courses: Planning Library Facilities, Marketing Library Services, Introduction to Financial Management, Information Sources in Clinical Medicine, and Health Professionals and Information. Examples of two of the offerings in the New Perspectives Seminar Series are Expert Systems Design and Information Resources in Gerontology and Geriatric Medicine.

The social events draw on the unique ambiance of the host city, New Orleans. The Headquarters Hotel (the Sheraton) borders New Orleans' most famous district, the French Quarter.

Inclusive conference fees are $200 (U.S.) for regular/institutional members, $295 (U.S.) for non-members.

For further information: Medical Library Association
919 N. Michigan Avenue, Suite 3208
Chicago IL 60611

SPECIAL LIBRARIES ASSOCIATION 79TH ANNUAL CONFERENCE
Location: Denver, Colorado
June 11-16, 1988

The conference theme is "Expanding Horizons: Strategies for Information Managers". Keynote speakers are Michael Annison, who will discuss the impact of future trends on the library/information profession, and Roger von Oech, one of the top "gurus" in creativity today. The Professional Development Section will offer a diverse program of continuing education courses. Offerings for experienced information professionals include "Artificial Intelligence: Concepts, Principles, and Applications", "Competitor Intelligence and the Corporate Librarian", as well as two Middle Management Institute offerings.

For more information: Special Libraries Association
1700 Eighteenth Street N.W.
Washington D.C. 20009
Tel.: (202) 234-4700

WHMIS CLASSIFICATION/CANADIAN CENTRE FOR OCCUPATIONAL HEALTH AND SAFETY
Location: Hamilton Convention Centre, 115 King St. West, Hamilton
May 17, 1988

The system to classify hazardous materials for the Workplace Hazardous Materials Information System (WHMIS) will be examined in a workshop held by CCOHS. The workshop will:

- Review classification processes
- Upgrade skills needed for WHMIS implementation
- Discuss sources of information and access to information
- Discuss ways to achieve consistency in classification

Two sample materials will be classified and different approaches and findings discussed by an expert panel. The participant fee is $150. To register, contact:

Committee Secretariat,
Canadian Centre for Occupational Health and Safety,
250 Main Street East, Hamilton ON L8N 1H6

Tel.: (416) 572-2981 ext. 279 or 287/ toll free 1-800-263-8276

UNYOC '88: DISCOVER YOUR WORTH!
Location: Westbury Hotel, Toronto
October 12-14, 1988

The organizers of UNYOC '88 believe that the chosen theme, DISCOVER YOUR WORTH!, allows for many exciting possibilities at a time when increasing numbers of health librarians are expanding or altering their roles to meet the challenges posed by changes in the delivery of health care and the information environment. In academic, hospital and other health care settings librarians are re-assessing their positions and relative value and seeking new ways to prove their worth.

If you have established your worth, or would like to present a paper on the value of any aspect of library organization or service, please contact Tom Flemming, Conference Chair. Tom would like to receive three copies of an abstract no longer than one page, bearing the name, mailing address, organizational affiliation (if appropriate) and daytime telephone number of the author(s) no later than April 29, 1988. He would also welcome papers on topics which are not specifically related to the conference theme. Tom Flemming may be contacted at:

McMaster University Health Sciences Library,
1200 Main St. West,
Hamilton, Ontario, Canada L8N 3Z5.

Those who submit abstracts by the deadline will receive a response no later than May 31, 1988.

NEW PUBLICATIONS

Adams DW, Deveau EJ. **Coping with Childhood Cancer: Where do we go from here?** Hamilton On: Kinbridge Publications, 1988.

The first edition of this self-help guide for families and learning resource for professionals sold out completely. Written by an experienced social worker and nurse with the help of parents, physicians and other professionals, the second edition is realistic, easy to read and deals with all issues in childhood cancer of concern to both parents and children. Unique features of this book are the Reader's Guide and the wealth of information gained from those who have coped with childhood cancer.

Order from: Kinbridge Publications, P.O. Box 5035, Station E, Hamilton, Ontario L8S 4K9.

Regular price $21.95 (Can).
Library price $17.95 (Can).
Orders outside Canada $19.95 (U.S.).

Add shipping and handling.
$1.75 first copy, $0.75 each additional copy.

Darling, L., ed. **Health Science Librarianship and Administration. Vol. III, Handbook of Medical Library Practice.** Chicago: MLA, 1988. 593 p.

As the editors state in the Preface, "the purpose of the Handbook remains the same: to serve as a practical manual reflecting current methods of organization and providing service from information resources to users of health sciences libraries of all types..." The book includes chapters on Interlibrary Co-operation, Promoting and Enhancing the Library Program, Space Planning, and General Principles on Administration. Volume III is $35.00 (U.S.) for MLA members. To order, or for further information: Medical Library Association, 919 North Michigan Avenue, Suite 3208, Chicago Illinois 60611. Credit card orders may be placed by calling (312) 266-2456.

Jeannine Lawlor, comp. **Social Work: A Guide to Reference Sources.** Montreal: Nursing/Social Work Library, McGill University, 1988. 24 p.

This annotated bibliography was prepared as a guide to the social work material in the reference section of the Nursing/Social Work Library at McGill University. The list gives a representative sample of the publications available. The most up-to-date material was selected for inclusion, with special emphasis on Canadian sources. The bibliography is available at $2.00 per copy from the Nursing/Social Work Library. Please send request on an ILL form.

Hebert, Francoise. **Photocopying in Canadian Libraries: Report of a National Study.** Ottawa: CLA/ASTED, 1987.

This national study on photocopying was conducted in 1987 to estimate the volume, nature and configuration of photocopying in academic, public and special libraries in Canada, and to analyse copying policies and practices. It contains up-to-date statistics on what is photocopied and how much is photocopied in Canadian libraries. The study is intended to help librarians to make informed judgements about photocopying under the Copyright Act, to negotiate and deal effectively with reprography collectives, and to better represent the interests of libraries and library patrons at a time when legislation regarding photocopying is being revised in Canada.

Copies can be obtained from the Canadian Library Association, at the members' price of $44 (non-members' price of $55), plus $7 postage and handling charges for single copy and prepaid orders ($13 in the U.S.).

Order from: Canadian Library Association
200 Elgin Street, Suite 602
Ottawa, Ontario K2P 1L5

Tel.: (613) 232-9625
ENVOY 100: CLAHQ

FAMLI: Family Medicine Literature Index Volume 8, 1987. Toronto: College of Family Physicians of Canada, 1988. 207 p.

This annual index to the family medicine literature is produced in cooperation with the National Library of Medicine, U.S.A. It consists of a subset of references from **Index Medicus**, selected for their relevance to family medicine, plus supplementary indexing of important family medicine journals not covered by **Index Medicus**. The index serves as a handy and inexpensive means of access to medical literature for small libraries, individuals, and all those with a particular interest in the family medicine literature. Volume 8, 1987 is now available for $48 ($58 outside the U.S. and Canada) from the Canadian Library of Family Medicine, Natural Sciences Centre, University of Western Ontario, London N6A 5B7. Cheques should be made payable to the College of Family Physicians of Canada.

A Guide to Drug Information and Literature: An Annotated Bibliography. 4th ed. Los Angeles, CA: Norris Medical Library. 42 p.

The fourth expanded and revised edition of Norris Medical Library's "**Guide to Drug Information**" is now available for purchase. This 42 page bibliography is available in paperback book format for $10.00 (U.S). Prepayment by cheque payable to the Norris Medical Library is necessary. Requests should be sent to: Reference Office, Norris Medical Library, University of Southern California, 2003 Zonal Avenue, Los Angeles CA 90033.

Manitoba Health Libraries Association. **Selected Books and Journals for Manitoba Health Care Facilities.**

The following bibliographies are now available to MHLA members and non-members:

1987	ALLIED HEALTH	$4.00
1985	BASIC REFERENCE TOOLS (1 p.)	
1985	LONG TERM GERIATRIC CARE	$4.00
	ALL ABOVE SECTIONS	$8.00

For further information contact Hélène Proteau, (204) 788-6462. Please make cheque or money order payable to the Manitoba Health Libraries Association.

Manitoba Health Libraries Association
Selected Books & Journals
Box 232, Postal Station C
Winnipeg, Manitoba R3M 3S7

Health and Welfare Canada. **Active health report: what we think, what we know, what we do: perspectives on Canada's Health Promotion Survey.** Ottawa, 1987. 43 p.

This is the first report on Canada's Health Promotion Survey. The aim of the survey was to explore what Canadians think, feel and know about health, and how these things relate to what they do. This report summarizes the survey's findings and reflects upon the challenges and opportunities they imply for health promotion. The report is available free from Health and Welfare Canada.

Report of the Task Force on the Implementation of Midwifery in Ontario. Toronto: Ontario Ministry of Health, 1987. 426 p.

This report of the Task Force chaired by Mary Eberts includes a 9 page bibliography. The report is available free to Ontario residents, $25.00 to those out-of province. An 18 page executive summary and summary of recommendations is also available in English or French, free to Ontario residents and $3.50 to those out-of province.

POSITIONS AVAILABLE

HEAD, NEILSON DENTAL LIBRARIES
The University of Manitoba Libraries

The University of Manitoba Libraries invites applications for the position of Head, Neilson Dental Library. The Neilson Dental Library, one of thirteen unit libraries within the Libraries system, has a staff of 1.25 FTE academic librarians and 3.45 FTE support staff. Reporting to the Associate Director of Libraries, the successful candidate will be responsible for the overall operation of the Library in all its aspects, including administration of the facilities, policy formulation, collection development, budget preparation and control, physical facilities plannning, library user services, technical services, supervision of staff, and staff development.

QUALIFICATIONS: An ALA accredited library degree. An undergraduate degree is required, preferably in one of the life sciences. Significant experience at the professional level in a dental or health sciences library, preferably at an academic institution. Demonstrated management skills. Knowledge of academic library public services, technical services activities, automated systems and collection development are also required. Personal qualifications of judgement, initiative and resourcefulness; the proven ability to work with staff and users at all levels. The successful candidate is expected to show evidence of participation in professional development and other relevant professional activities.

RANKS AND SALARY RANGES: Commensurate with qualifications and experience:

Assistant Librarian	$27,090 to $47,272
Associate Librarian	$34,023 to $59,365

In addition, this Department Head position carries a stipend of $2,582 per annum. (Salaries are presently under review). Librarians enjoy academic status and are appointed to one of four ranks; General, Assistant, Associate and Librarian, with the possibility of promotion. This position has a two-year probationary period.

EFFECTIVE DATE: July 1, 1988

Both women and men are encouraged to apply. In accordance with Canadian immigration requirements, this advertisement is directed to Canadian citizens and permanent residents.

Submit applications including resume, salary expectations and the names of three referees by April 30, 1988 to:

Earle C. Ferguson, Director of Libraries
University of Manitoba, Winnipeg, Manitoba R3T 2N2

To accommodate BMC's publication schedule, late applications may be considered.

LIBRARIAN (SYSTEMS AND PLANNING)
Health Sciences Library, Memorial University of Newfoundland

The Health Sciences Library of Memorial University of Newfoundland is seeking applicants for the full-time, tenure track position of Librarian (Systems and Planning). This position reports directly to the Health Sciences Librarian.

DUTIES AND RESPONSIBILITIES: The major responsibility of this position is to act as an innovator and resource person in implementing computer-based systems in the Health Sciences Library. The Library is currently investigating the feasibility of CD-ROM-based public access catalogue and the successful applicant will be heavily involved with the introduction and implementation of this system.

As directed by the Health Sciences Librarian, the successful applicant will also be responsible for conducting preliminary investigations into matters chiefly concerning the Library's present physical environment and future requirements. Such investigations will include the formulation of projections and recommendations for consideration by the Health Sciences Librarian and the Library's Administrative Group.

As a member of the Library's professional staff, the successful applicant will assist in the provision of information services to the Library's clientele (including on-line searching) and will participate in the Library's collections development programme.

BENEFITS: Rank and salary will be based on qualifications and experience. The standard academic fringe benefits are available including eligibility for sabbatical and study leaves. Tenure track positions include a generous moving allowance.

QUALIFICATIONS: An MLS or BLS from an accredited program is required. Experience in or familiarity with the identification and implementation of computer-based systems in a library setting is a prerequisite for this position. Good communication skills - both oral and written - are mandatory. Previous experience searching the MEDLARS and DIALOG or BRS systems is required. Other desirable characteristics include: experience in providing general information services to health care personnel; knowledge of the strategic planning process; and familiarity with bibliographic instruction and/or end-user training.

The application deadline for this position is April 15, 1988. Those interested should forward their resume and the names of three references to:

C. Quinlan, Health Sciences Librarian
Health Sciences Library, Health Sciences Centre
Memorial University of Newfoundland
St. John's, Newfoundland A1B 3V6

To accommodate BMC's publication schedule, late applications will be considered.

ASSISTANT HEAD, TECHNICAL SERVICES DIVISION
Health Sciences Library, Memorial University of Newfoundland

The Health Sciences Library of Memorial University of Newfoundland is seeking candidates for the position of Assistant Head, Technical Services Division. This position reports directly to the Head, Technical Services Division and, in the absence of the Head, is responsible for the supervision of the Division's nine FTE support staff.

DUTIES AND RESPONSIBLITIES: The primary function of this position is to conduct a comprehensive review of the Division's policies and procedures and to submit recommendations to the Head, Technical Services. In addition, the successful applicant will be responsible for evaluating vendor performance and selection; planning and supervising a stack shift of the Library's journal collection of approximately 50,000 volumes; and organizing and coordinating a local union list of serials for the St. John's hospital libraries. Other divisional responsibilities include: assisting the Head, Technical Services in planning for the implementation of an online system; assisting in the interpretation and application of AACRII; and working on special projects as required.

The successful applicant will also assist in the provision of information services to the Library's clientele and will participate in the monthly meetings of the Library's professional staff where general Library programmes and policies are discussed.

QUALIFICATIONS: An MLS or BLS from an accredited programme is required. A minimum of two years experience in technical services, preferably in the health sciences, is a prerequisite for the position. Experience in serials is essential. Knowledge of and interest in the application of online systems in a technical services environment is highly desirable.

This position is offered on a two-year contractual basis. Those interested in being considered for this position should forward their resumé and the names of three references to:

C. Quinlan, Health Sciences Librarian
Health Sciences Library, Health Sciences Centre
Memorial University of Newfoundland
St. John's, Newfoundland A1B 3V6

SCIENCES LIBRARIAN

University of Western Ontario

Reporting to the Director of Libraries, the Sciences Librarian is responsible for the management of the collections, staff and physical resources of the Sciences Library within the policies and procedures of the University Library System to provide the materials and services required by the faculty, staff and students in the Faculties of Applied Health Sciences, Dentistry, Medicine, Nursing and Science.

The Sciences Library has a collection of approximately 400,000 items and subscribes to 5,000 standing orders. The staff numbers twenty-five plus a varying number of part-time assistants.

Candidates must have a Master of Library Science and five years experience at the middle management level, sound judgement, excellent communications skills, excellent planning and management skills and a thorough knowledge of technological developments as they pertain to libraries.

Preference will be given to those applicants with the above qualifications and who have a graduate degree in one of the Sciences.

Salary will be commensurate with experience and qualifications. Qualified applicants may apply by April 30, 1988 to:

Dorothy Fox, Head, Personnel Department
Library Personnel Office
The D.B. Weldon Library
University of Western Ontario
London, Ontario
N6A 3K7

Tel.: (519) 679-2111

CANADIAN HEALTH LIBRARIES ASSOCIATION BOARD OF DIRECTORS / BMC STAFF

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Tel: (204) 237-2955

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